RECEIPT FOR REGI	STE	ERED OR INSURE	D MAIL	FOR		DATE
RECEIPT FOR REGISTERED OR INSURED MAIL For use of this form, see AR 341-2; the proponent agency is The Adjutant General's Office.						
TO: Defense Post Office						
Messengers or clerks must check each entry on this receipt and draw diagonal lines through unused spaces.						
BILLING CLERK AND TIME	NO.	NAME			REGISTRATION NUMBER OR INSURED NUMBER	ROTARY LOCK NUMBER OR OFFICE OF ORIGIN
	1					
	2					
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					
	13					
14						
	15					
DELIVERY CLERK AND TIME			TOTAL NO. OF PIECES	RECEIVED BY		DIVISION